

A Measure of Our Health and Health System

A Federal/Provincial/Territorial Initiative

November 30, 2004

Measuring Health

Measuring health and health system indicators improves Nova Scotia's ability to assess the health of Nova Scotians and the performance of its health system.

The Nova Scotia government believes that health decisions must be based on good evidence.

That's why the First Ministers (Premiers across Canada and the Prime Minister) have taken a coordinated approach to reporting information about Canadian health and health systems.

This document is part of a federal/provincial/territorial effort to report reliable and comparable health and health system information from across Canada, using data collected nationally.

All provinces and territories are required to feature similar information in their own reports. Nova Scotia information is presented in this document. You can access provincial/territorial information, and find out more about this federal/provincial/territorial initiative, by visiting www.cihi.ca/comparable-indicators.

Using national data is just one of the many ways to assess the health of Nova Scotians and our health care system.

We recognize that we still face challenges in accessing reliable health and health system information. However, we are making progress. Nova Scotia is investing in information management and information technology initiatives, not only because they play a vital role in the management of our health care system, but also because the information gathered will help us to make the right decisions to deliver better health care to Nova Scotians across the province.

How do Nova Scotians view their health and health system?

- o In 2003, 95 per cent of Nova Scotians aged 15+ reported having a family doctor.
- o In 2003, 14 per cent to 26 per cent of Nova Scotians reported having difficulty accessing health information, health services or care at any time of the day.
- o In 2003, more than 80 per cent of Nova Scotians were satisfied with the way health care services were provided.
- o In 2003, only 58 per cent of Nova Scotians aged 12+ rated their health as very good or excellent.
- o In 2003, almost 10 per cent fewer Nova Scotians aged 12+ reported being smokers than did in 1994-95.
- o In 2003, over half of Nova Scotians age 18+ (54 per cent) reported being overweight or obese.

Sources: Statistics Canada, *Canadian Community Health Survey 2003* and *Health Services Access Survey 2003*

This report and the data that it contains have been audited by the Auditor General of Nova Scotia. To view the Auditor General's full report, please visit www.gov.ns.ca/health.



Accessing Services

Access to health care services is always a key priority. Receiving feedback from Nova Scotians on access issues is important.

In 2003, Statistics Canada's *Canadian Community Health Survey* asked how many Nova Scotians have a regular family health care provider, such as a family doctor or nurse practitioner. Almost 95 per cent of Nova Scotians aged 15+ said they had a regular family physician.

Waiting for Tests

Another tool used to gather information about access is Statistics Canada's *Health Services Access Survey*. In 2003, this survey asked Canadians to report on various access issues.

Nova Scotians were asked how long they waited for selected diagnostic tests such as a CT scan or MRI. Nova Scotians reported that they waited a median time of two weeks for these diagnostic tests.*

- 63 per cent of Nova Scotians said they waited less than one month
- 30 per cent of Nova Scotians said they waited between one month and three months
- 7 per cent of Nova Scotians said they waited more than three months*

In Nova Scotia we are working to obtain good provincial wait times data through the standardized collection of wait time information for a number of key services, such as the time it takes to get a hip replacement or to see a specialist.

Having this information will help make sure that patients who need service most urgently get it first. We are also investigating the impact of last-minute appointment cancellations and the need for more long-term care or nursing home beds.

* Statistics Canada has cautioned the use of this information due to statistical reliability of the data.



In 2003, Statistics Canada's *Health Services Access Survey* asked Nova Scotians:

Did you have difficulties accessing routine or ongoing care at any time of the day?

- o 14 per cent said they had difficulty accessing services

Did you have difficulties accessing health information or advice at any time of the day?

- o 15 per cent said they had difficulty accessing information

Did you have difficulties accessing immediate care for a minor health problem at any time of the day?

- o 26 per cent said they had difficulty accessing immediate care for a minor health problem

Caring for Chronic Conditions

Many chronic diseases such as asthma, hypertension, and diabetes can be managed effectively through outpatient care. Measuring the number of people who end up in hospital for treatment of these chronic conditions can help us to assess how well we are providing access to outpatient care for these conditions. In 2001-02, 355 Nova Scotians per 100,000 were treated in hospital for conditions that could have been managed through outpatient care. This rate is about one-third less than it was in 1995-96 when the rate was 596 Nova Scotians per 100,000.

The expansion of primary health care services is helping to ensure that more Nova Scotians can effectively manage chronic diseases before they require hospitalization.

Source: Hospital Morbidity Database, CIHI, Census, Statistics Canada

Prescription Drugs

Access to prescription drugs also has an impact on Nova Scotians' health. While most Nova Scotians can access community pharmacies, being able to pay for prescription medication is a different story. In 2002, about 72 per cent of Nova Scotian households reported they had spent some of their after-tax income on prescription drugs. Most Nova Scotians pay very little out of their own pockets for prescription drugs due to having some type of insurance coverage. Some Nova Scotians, however, spend more than 5 per cent of their after-tax income on prescription medications. About 4 per cent of Nova Scotian households spent over 5 per cent of their after-tax income to access prescription drugs.

Ministers of Health across the country are discussing ways to improve pharmaceutical management in Canada.

Source: Statistics Canada, *Survey of Household Spending*, 2002

Healthy Populations

Despite reporting general satisfaction with health care services, only 58 per cent of Nova Scotians aged 12+ rated their health as very good or excellent.

Many things affect a person's health including income, access to health services, genetics, and education.

Quality of Life

We know that Nova Scotians who report being in the lowest income group live shorter lives than those who report being in the highest income group. Further, we know that Nova Scotians who are in low-income groups have fewer "quality of life years."

Quality of life years are the years a person lives without disability or chronic illnesses such as heart disease and diabetes. The idea of quality of life years versus total years of life is called health adjusted life expectancy (HALE).*

*The use of HALE is cautioned. For information regarding HALE, please visit <www.cihi.ca/comparable-indicators> and <www.statcan.ca/hale>.

Nova Scotian households spent more than what % of their after-tax income on prescription medication?

% of Nova Scotian Households Spent ...

% of Their After-Tax Income

72% spent ...	More than 0%
27% spent ...	More than 1%
15% spent ...	More than 2%
9% spent ...	More than 3%
7% spent ...	More than 4%
4% spent ...	More than 5%

These numbers do not add to 100 % because if I spend over 5% of my income on prescription drugs, I also spend over 4, 3, 2, 1, and 0% of my income on prescription drugs.

Total Years of Life vs Health Adjusted Life Expectancy (HALE), 2001

Sex and Income Group

	Total Years of Life	HALE*
Female		
Low	80.5	68.1
Mid	81.1	70.4
High	82.6	71.9
Male		
Low	74.8	63.5
Mid	76.3	67.5
High	77.5	68.6



Diabetes

In 1999–2000, 5 per cent of Nova Scotian women and 6 per cent of Nova Scotian men had diabetes. Nova Scotia's prevalence of diabetes is about half a percent higher than the Canadian average. Continued growth in Nova Scotia's rate of diabetes may have an impact on life expectancy, prevalence of heart disease, and other related chronic illnesses.

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Healthy Living



The good news is fewer Nova Scotians are smoking: 23 per cent of Nova Scotians aged 12+ reported being daily or occasional smokers—almost 5 per cent fewer than in 2000–01 and almost 10 per cent fewer than in 1994–95.

Teenage smoking rates are also on the decline. In 2003, 13 per cent of Nova Scotian teenagers aged 12–19 reported being daily or occasional smokers—5 per cent fewer than reported in 2001.

More Nova Scotians are becoming physically active. Almost 5 per cent more Nova Scotians aged 12+ reported being moderately active to active than in 2001: 47 per cent in 2003 compared to 42 per cent in 2001. Fewer Nova Scotians reported being physically inactive—50 per cent in 2003 compared to 53 per cent in 2001.*

Almost 10 per cent more Nova Scotians aged 65+ got flu shots in 2003 than did in 1996–97. In 2003, about 67 per cent of Nova Scotians aged 65+ said they had a flu shot in the last year.

This information tells us that in various areas of their lives, Nova Scotians are being more proactive about their health.

While Nova Scotians are making improvements in their health, being more physically active and quitting smoking, many are still struggling with their weight. In 2003, over half of Nova Scotians 18+ (54 per cent) reported being overweight or obese.

Healthy eating among children and adults and increased physical activity will help to lessen the prevalence of obesity in Nova Scotians. Healthy eating and physical activity strategies, developed by the Nova Scotia Office of Health Promotion, are helping people lead healthier and more physically active lives in their communities.

*Caution is required when interpreting changes over time.

For more health information, and the technical specifications and limitations of the data presented here, please visit <www.cih.ca/comparable-indicators>, and the document there, entitled *PRTWG Considerations*. You may also contact the Information Analysis and Reporting Branch, Nova Scotia Department of Health, at 902-424-8291.

For more information about the health of Nova Scotians and their health system, please visit <www.gov.ns/health and www.gov.ns/ohp>.

Satisfaction with Services

The 2003 Canadian Community Health Survey asked Nova Scotians who used health care services in the past 12 months how satisfied they were with the services they received.

From this information, we know that Nova Scotians are generally satisfied with the health care services they received, but there is still some room for improvement, particularly for hospital and community-based care.

Overall, how satisfied were you with the way health care services were provided?

- 85 per cent were very or somewhat satisfied

Overall, how satisfied were you with the way community-based care was provided?

- 86 per cent were very or somewhat satisfied

Overall, how satisfied were you with the way telephone health line services were provided?

- 91 per cent were very or somewhat satisfied

Based on your most recent visit, how satisfied were you with the way hospital services were provided?

- 82 per cent were very or somewhat satisfied

Based on your most recent care received, how satisfied were you with the way physician care was provided?

- 94 per cent were very or somewhat satisfied



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